

Carmarthenshire County Council

EDUCATION COMMITTEE

Annual Report

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER

for the Year ended 31st December, 1955

LLANELLY:

Printed by the Llanelly Mercury Printing Co., Ltd.

Carmarthenshire County Council

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**ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL
OFFICER FOR THE YEAR ENDED 31st DECEMBER, 1955**

It is with pleasure that I submit the report on the School Medical Service for 1955. The general condition of the children has continued to show an improvement. This, in all probability, is due to the continuation of the School Meals Service.

The School Medical Inspections and school clinics have carried on satisfactorily in the usual manner and there were no routine examinations outstanding at the end of the year.

Measles was prevalent during the year with a record number of 3,094 cases notified as compared with eleven in the previous year. There were also 130 cases of whooping-cough as compared with 222 in 1954. We are in all probability now seeing the effects of immunisation against whooping cough.

There were eleven cases of acute poliomyelitis, eight of whom were school children.

The waiting list for ophthalmic examination at the end of the year struck a disappointing note there being 528 children awaiting examination as compared with 481 at the end of 1954. The number of cases seen by the Eye Specialists was 1,455 as compared with 1,748 in 1954.

So far as Ear, Nose and Throat treatment is concerned the position remains much the same.

The audiometric testing of children with hearing defects was commenced during the year.

The School Dental Service continued to show improvement despite the shortage of staff. Reference must be made to the fact that Mr. G. U. Griffiths, Principal School Dental Officer, who has been on the staff of the Authority since 1925, is due to retire in 1956.

Mr. Griffiths was the pioneer of the School Dental Service in the County and the success of the service is primarily due to his sterling qualities and enthusiasm often in adverse circumstances. His retirement will be a distinct loss to the authority.

The success achieved by a service such as the School Health Service depends a good deal on co-operation with other sections of the Medical Service and to an important degree, with the Education Department from whose Director and Staff we received the closest support in this work.

The close liaison developed with general practitioners is fully maintained.

I am grateful to the Chairman, Vice-Chairman and members of the Education Committee, for their help and the kind consideration they have shown me, and to the teachers for their continued interest and valuable assistance. I would also record my appreciation of the loyal co-operation of members of the professional, nursing, and administrative and clerical staff.

R. EVANS,

Principal School Medical Officer.

STAFF

Principal School Medical Officer :

R. Evans, M.D., B.Sc., D.P.H.

Deputy Principal School Medical Officer and Divisional School Medical Officer :

D. G. G. Jones, M.B., B.S., D.P.H.

School Medical Officers :

E. T. Davies-Humphreys, M.R.C.S., L.R.C.P.

D. O. Davies, M.R.C.S., L.R.C.P.

M. G. Danaher, M.B., B.Ch., B.A.O., L.M., D.P.H.

Marjorie J. A. Lewis, B.Sc., M.B., B.Ch.

Edna E. Williams, B.Sc., M.B., B.Ch.

J. G. E. Collins, M.R.C.S., L.R.C.P.

*E. H. Beynon-Hopkins, M.R.C.S., L.R.C.P., D.P.H. (part-time).

*Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (part-time).

†Elfyn T. Jones, B.Sc., M.R.C.S., L.R.C.P., D.P.H. (part-time).

* Divisional Medical Officer of Health.

† District Medical Officer of Health.

Principal School Dental Officer :

G. Ungood Griffiths, L.D.S., R.C.S.

School Dental Officers :

J. L. T. Davies, L.D.S., R.C.S.

W. E. T. Llewelyn, L.D.S., R.C.S.

D. L. Walters, L.D.S., R.C.S.

F. G. Day (temporary).

Gwilym Evans, L.D.S., R.C.S. (part-time).

Dental Attendants :

Mrs. V. M. Arundel.

Miss E. B. Evans.

Miss A. M. Maliphant.

Miss M. A. Thomas.

Miss J. Jenkins.

Miss Daphne M. Thomas (part-time).

Senior Orthopaedic Sister :

Miss E. R. Buckley, M.C.S.P.

Assistant Orthopaedic Sister :

Mrs. O. Turner Evans, M.C.S.P.

Speech Therapist :

Miss M. Philippa Francis, L.C.S.T.

Chief Nursing Officer :

Miss M. Evans, S.R.N., S.C.M., H.V.Cert.

Deputy Superintendent Health Visitor :

Miss F. Hughes, S.R.N., S.C.M., H.V.Cert.

Consultants available for School Health Service :

Orthopaedic Surgeons :

G. D. Rowley, M.Ch. (Orthop.). Swansea.
E. Mervyn Evans, F.R.C.S., Swansea.

Ophthalmic Surgeons :

J. J. Healy, M.B., Ch.B., Llanelly.
G. S. Forrester, M.B., Ch.B., D.O.M.S., Llanelly.
A. Philipp, L.R.C.P., L.R.C.S., L.R.F.P.S., D.O.M.S., Llanelly

Ear, Nose and Throat Surgeons :

T. I. Williams, F.R.C.S., Llanelly.
S. Morgan, F.R.C.S., Carmarthen.

Hon. Plastic Surgeon :

T. Pomfret Kilner, F.R.C.S., Oxford.

Paediatrician :

R. T. Jenkins, M.R.C.P., D.C.H., Swansea.

Dermatologist :

D. Rhys Lewis, M.D., F.R.C.P., Swansea.

Orthodontist :

R. E. Rix, M.R.C.S., L.D.S., R.C.S., London.

Chest Physicians :

J. T. Jones, B.Sc., M.B., Ch.B.
D. B. Ll. Morgan, M.D.

Assistant Chest Physicians :

J. Williams, M.B., B.Ch.
J. Morgan, M.B., B.S.

Psychiatrists :

Sidney Davies, M.B., B.S., D.P.M.
J. Farr, M.B., B.S., B.Ch., D.P.M.
E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M.

Child Psychiatrist :

G. Crosse, M.B., B.S., D.P.M.

Pathologist :

Gwenfron M. Griffiths, M.D., M.R.C.P.

Bacteriologist under Medical Research Council :

W. Kwantes, M.A., M.B., B.Ch., Dip. Bact.

NURSING

District.	Nurse.	Qualifications.
Whole-time Nurses.		
Amman Valley	M. G. Evans	S.R.N., S.C.M., H. V. Cert.
Ammanford	A. Howells	S.R.N., S.C.M., H. V. Cert.
Burry Port	R. M. Walters	S.R.N., S.C.M., H. V. Cert.
Trimsaran	G. M. Williams	S.R.N., S.C.M., H. V. Cert.
Llangennech	E. Edwards	S.R.N., S.C.M., H. V. Cert.
Carmarthen Borough	D. Murray	S.R.N., S.C.M., H. V. Cert.
St. Clears	M. E. E. Davies	S.R.N., S.C.M., H. V. Cert.
Llanelly Borough	C. Jones	S.R.N., S.C.M., H. V. Cert.
	M. C. Jones	S.R.N., S.C.M.
	G. Greene	S.R.N., S.C.M., H. V. Cert.
	G. M. Roberts	S.R.N., S.C.M., H. V. Cert.
	D. C. Insley	S.R.N., S.C.M., H. V. Cert.
Felinfoel	E. M. Jones	S.R.N., S.C.M., H. V. Cert.
Tumble	E. J. M. Jones	S.R.N., S.C.M., H. V. Cert.
Llandebie	A. E. Jones	S.R.N., S.C.M., H. V. Cert.
Pencader	O. M. Hobson	S.R.N., S.C.M., H. V. Cert.
Bancyfelin	E. N. E. Davies.....	S.R.N., H. V. Cert.
Llandilo	C. M. Bailey	S.R.N., S.C.M., H. V. Cert.
Nantgaredig	E. Evans	S.R.N., S.C.M., H. V. Cert.
Llangendeirne	M. E. Thomas	S.R.N., S.C.M., H. V. Cert.
Llandovery	M. M. Davies	S.R.N., H. V. Cert.
Conwil	N. G. E. Baker	S.R.N., S.C.M., H. V. Cert.
Whitland	M. E. Fisk	S.R.N., S.C.M., H. V. Cert.
Part-time Nurses.		
Llansawel	M. L. Angel	S.R.N., S.C.M.
Cilycwm	E. G. Cox	S.C.M.
Caio	S. Jenkins	S.C.M., S.E.A.N.

COMMUNICABLE DISEASES

No schools were closed during the year on the advice of the Principal School Medical Officer on account of outbreaks of communicable diseases. One school (Cefnarthren C.P.) was, however, closed for fourteen days (10th to the 23rd October) by the Local Sanitary Authority on the advice of the District Medical Officer of Health on account of an outbreak of acute poliomyelitis in the neighbourhood.

The practice of closing schools has long been discounted as an effective means of preventing the spread of infection and it is only in very exceptional circumstances that it is resorted to.

The communicable diseases mainly affecting school children are measles and whooping cough.

During 1955, measles was epidemic in the County. 3,094 cases were notified to District Medical Officers of Health during the year, the peak period being the last week in July when 290 notifications were received. During the last quarter of the year, there was an average of approximately 90 cases notified each week.

Whooping Cough was not so much of a problem and only 130 cases were notified to District Medical Officers of Health during the whole year, the majority of cases occurring in the first and last quarters.

The following comparison of the notifications received during the last four years is of interest :—

	1952	1953	1954	1955
Measles	1009	809	11	3094
Whooping Cough	196	272	222	130

Acute Poliomyelitis.—Eleven cases of acute poliomyelitis in children were confirmed in the County during the year. Eight of the cases were paralytic and three were non-paralytic. Their age distribution was as follows :—

	Under 5 years of age.	Over 5 and under 10 years of age.	Over 10 and under 15 years of age.
Paralytic	2	3	3
Non-Paralytic	1	1	1
Total	3	4	4

In 1954 there were only two cases, both non-paralytic.

MEDICAL INSPECTION AND FINDINGS

All the Primary, Secondary and Grammar Schools in the County were visited during the year for medical inspection in accordance with the requirements of the Ministry of Education. In addition 53 Schools were visited for the re-examination of children previously referred for treatment or observation. 9,511 children were examined in the routine age groups and 4,244 special inspections and re-inspections were made. A summary of the findings of medical inspection is given in Table II at the end of this report. The following are notes on some of the defects found :—

Skin Diseases.—71 cases required treatment and 148 cases were referred for observation.

Eye Defects.—Treatment was advised for 806 children with defective vision and 73 children with squint, while 1000 cases of defective vision and 126 cases of squint were referred for observation.

Ear Conditions.—15 cases of defective hearing were referred for treatment and 40 for observation. Treatment was required for 38 cases of Otitis Media (ear discharge) and a further 95 cases were referred for observation. 20 cases of other ear conditions were also referred for treatment and 37 for observation.

Nose and Throat Conditions.—There were 538 cases of nose and throat defects (including enlarged tonsils and adenoids, sinusitis, antral conditions, etc.) requiring treatment, and a further 1070 were referred for observation.

Speech.—Treatment was advised for 111 cases of defective speech and 120 cases were referred for observation.

Nutrition.—Of the 9,511 children seen at routine medical inspection, only 16 (0.17%) were of poor general condition. 3,004 (31.58%) were of fair and 6,491 (68.25%) of good general condition. The figures indicate that the general physical condition of the children in the County has shewn an overall improvement

FOLLOWING-UP

Much of the success of the School Health Service depends on the " field work " undertaken by the School Nurses. They follow up in the homes, those cases found to be defective at medical inspection, and also visit the homes of children suffering from communicable disease, uncleanliness, etc. 1,466 surprise visits to Schools were made by the School Nurses during the year to make cleanliness surveys. Table III at the end of this report summarises this work. In addition, the Nurses made 3,537 home visits.

“ Following-up ” is also carried out by the School Medical Officers by periodic re-inspections, and many special visits were made to Schools to examine special cases. During the year 53 Schools were re-inspected by the Medical Officers and 1,600 children were re-inspected.

MEDICAL TREATMENT

Minor Ailments.—Ailments such as skin diseases, minor eye and ear diseases, injuries, cuts, etc., were treated at the Minor Ailments Clinics at Llanelly, Carmarthen and Ammanford. Many cases were also treated privately by medical practitioners, and at the homes of children under the supervision of School Nurses. 932 children were known to have been treated during the year. The total attendances at the Clinics were 2,089, i.e., 1,310 at Llanelly, 352 at Carmarthen, and 427 at Ammanford.

Vision.—The specialist ophthalmic examination of children was undertaken by the Regional Hospital Board through the Hospital Management Committees. Mr. A. Philipp, Llanelly, held sessions at the Ophthalmic Centre at the West Wales General Hospital, Carmarthen, and Mr. G. S. Forrester, Llanelly, held sessions at Llanelly and at the Amman Valley Hospital. Sessions at Llanelly were held at the Brynmair School Clinic, but cases were also seen at the Outpatient Department of the Hospital.

1,455 children were dealt with by the Eye Specialists during the year, viz :—

	Outpatients.	Inpatients.	Total.
West Wales Hospital	554	18	572
Llanelly Hospital	535	77	612
Amman Valley Hospital	271	—	271
Totals	1360	95	1455

Glasses were prescribed for 786 children and records held by the School Medical Officer showed that 689 had been provided with glasses at the end of the year.

528 children were on the waiting lists for specialist ophthalmic examination on the 31st December, 1955, viz :—

Carmarthen	.....	.....	346
Llanelly	.....	.....	120
Amman Valley	.....	.....	62
			<hr/>
Total	.....	.....	528
			<hr/>

Ear, Nose and Throat Defects.—Children with ear, nose and throat defects are referred for specialist examination at the West Wales, Llanelly, Llandovery and Amman Valley Hospitals. With the exception of the Amman Valley Hospital, where the arrangements are made by the Hospital Secretary, children are directed by the School Medical Officer to attend for these examinations. Hospitals, of course, also dealt with children referred to them directly by general medical practitioners.

Children found to require inpatient treatment were placed by the specialists on the Hospital waiting lists, and the arrangements for admission were made by the Hospitals. Children have no priority of admission and have to take their chance with adults on the waiting lists. The following Table gives information as to the number of children who received operative treatment during the year :—

	Ear Diseases.	Adenoids and chronic tonsillitis.	Other nose and throat conditions.	Total.
West Wales Hospital	80	171	—	251
Llanelly Hospital	79	199	101	379
Amman Valley Hospital	1	71	7	79
				<hr/>
Totals	160	441	108	709

53 more children received operative treatment at Hospitals than during 1954. There were at the end of 1955, 490 children on the waiting list for admission to Llanelly and Amman Valley Hospitals. Information as to the waiting list at the West Wales Hospital was not available. There was, again, an increase in the waiting list for specialist examination.

Comparison of the waiting lists for examination at the end of 1954 and at the end of 1955 is as follows :—

Hospital	Waiting for Specialist Examination		Waiting for admission to Hospital		Total	
	At 31 Dec. 1954	At 31 Dec. 1955	At 31 Dec. 1954	At 31 Dec. 1955	At 31 Dec. 1954	At 31 Dec. 1955
West Wales	66	97	145	?	211	?
Llanelly	15	30	279	333	294	363
Amman Valley	23	16	199	157	222	173
Llandovery	49	54	—	—	49	49
Total	153	197	623	?	776	?

181 miscellaneous cases received non-operative treatment at Hospital Outpatient Departments.

Partially Deaf Children.—The arrangements for the ascertainment of partially deaf children by means of audiometric tests were commenced towards the end of the year. Initially the surveys were confined to entrants to Junior Schools or Departments, i.e., those about 7 years of age. Any other cases suspected by School Medical Officers to be suffering from defective hearing or whom the Head-teachers report to be suspect are given priority. Five schools were visited and 75 children tested of whom seven suffered from defective hearing and are being further investigated.

Plastic Treatment.—The arrangements for the plastic treatment of children at The Churchill Hospital, Oxford, continued during the year.

Three cases were treated there ; one cleft of lip and palate and two of cleft palate only.

Artificial Light Therapy.—No School child received artificial light treatment at the Carmarthen Clinic.

Asthma.—The Asthma Clinics at Llanelly, Carmarthen and Ammanford, under the care of Dr. Jones, Deputy Principal School Medical Officer, Dr. E. T. Davies-Humphreys, and Dr. M. J. A.

Lewis respectively, continue to function successfully. 1,046 attendances were made at the Clinics during the year. There were 83 new cases. Further information is given in the following table :—

	Ammanford. Llanelly. Carmarthen. Total.			
No. of cases on 1st January, 1955.....	81	.....	157	..... 140 378
No. of new cases	12	.....	30	..... 41 83
No. withdrawn	—	.....	76	..... 61 137
No. of cases on 31st December	93	.....	111	..... 120 324
Total attendances	257	.....	274	..... 515 1046

Treatment was on the same lines as for past years and there are no special observations to make.

Orthopaedic Treatment.—The Education Committee continued to administer the Clinics for the orthopaedic supervision and after-care of children. The charge of 25/- per case per annum for the supervision of the cases of other Authorities remained unchanged, but the Health Committee paid a fixed lump sum in respect of children under school age.

On the 31st December, 1955, 2,135 cases were being attended to for all Authorities, viz. :—

County Education Committee	.....	.....	..... 1303
County Health Committee	.....	.....	..... 804
West Wales Hospital Management Committee	.....	.....	..... 12
Glantawe Hospital Management Committee	.....	.....	..... 16

An analysis of these cases according to diagnosis is as follows :—

	County Education Committee.		Other Authorities.	Total.
Paralysis :				
Infantile 21	..... 57
Spastic 14	..... 57
Obstetrical
Other 1	..... 2
Congenital Deformities 129	..... 274
Infective Conditions of Bones and Joints 3	..... 5
Non-Infective Conditions of Bones and Joints :				
Rickets 2	..... 6
Other 4	..... 18
Static and Postural Defects 646	..... 1683
Traumatic Deformities 4	..... 15
Multiple Defects
Miscellaneous 8	..... 18
Totals 1303	..... 832	..... 2135

Mr. Gordon Rowley, the Orthopaedic Surgeon, treated 26 of the Authority's cases as inpatients: 3 at Morryston Hospital, one at Swansea Hospital and 22 at Gorseinon Hospital. Cases for special or X-ray examination were referred to the Outpatient Department of Morryston, Swansea and Llanelly Hospitals.

On the 31st December, 20 children referred from the Orthopaedic Clinics were on the waiting list for hospital inpatient treatment, as compared with 22 on the 31st December, 1954.

Early in the year, arrangements were made for an additional consultant clinic to be held quarterly at Carmarthen, the Orthopaedic Surgeon being Mr. Mervyn Evans, Consultant Orthopaedic Surgeon to the West Wales Hospital Management Committee.

Mr. Evans treated one of the Authority's cases at the West Wales General Hospital and one case was waiting admission at the end of the year.

Child patients not under the County Orthopaedic Clinics were attended to by Hospitals under their own arrangements, and the following table summarises those cases so far as known to the School Medical Officer :—

Hospital.	Inpatients.		Outpatients.	
	Crippling Defects.	Fractures.	Crippling Defects.	Fractures.
West Wales General Hospital	23	20	46	102
Other Hospitals	—	—	10	3
Total	23	20	56	105

During the year, there were 15,366 attendances at the Clinics in the County, and the following table shows the case-loads of the various Clinics at the end of the year :—

Llanelly	568	Tumble	111
Garnant	68	Llandilo	91
Pontyberem	59	Carmarthen	334
Llandovery	88	Burry Port	123
St. Clears	79	Pencader	45
Trimsaran	34	Brynamman	63
Ammanford	237	Llandeibie	64
Whitland	48	Pontyates	83
Kidwelly	40		

A summary of the work undertaken under the orthopaedic arrangements during 1955 is given in the following table :—

	County Education Committee.	Other Authorities.	Total.
Number of individual cases under Scheme on 1st January, 1955	1365	753	2118
Number of new cases during the year	241	353	594
Number of individual cases dealt with during the year	1708	1110	—
Number of cases withdrawn from Scheme	405	172	577
Number of cases under the Scheme on the 31st December	1303	832	2135
Total number of attendances made at the Clinics	11911	3455	15366
Number of individual cases received remedial exercises by Sisters	592	1	593
Number of individual cases massaged by Sisters	—	1	1
Number of home visits by Sisters	523	420	943
Number of cases examined by visiting Orthopaedic Surgeons	256	146	402
Number of cases recommended in - patient hospital treatment by Surgeons	28	6	34

Speech Therapy.—The four Speech Therapy Clinics established by the Committee continued to function successfully during the year. An additional session was allotted to Llanelly owing to the long list of cases awaiting treatment, leaving one session per week free to enable the Speech Therapist to visit schools to follow-up cases.

At the end of the year, sessions as follows were held weekly at each clinic :—

Clinic.	Number of sessions.
Carmarthen	2
Llanelly	4
Ammanford	3
Llandilo	1

127 new cases were referred to the clinics and treatment was recommended and commenced for 101 of them. 23 did not require treatment and treatment was deferred until later in three instances.

180 cases received treatment at the Clinics, 96 of which were treated for the first time during the year. Five cases refused to attend for treatment. The following is a summary of the defects found to require treatment during the year :—

	Carmar- then	Llanelly	Amman- ford	Llan- dilo	Total
Defects of Articulation	17	12	10	3	42
Stammer	7	4	6	—	17
Retarded Speech	1	1	—	—	2
Clutterer	—	1	—	—	1
Stammer and poor articulation	1	—	—	1	2
Excessive or inadequate nasal resonance	—	2	—	—	2
Cleft Palate	1	2	—	—	3
Slurring	1	—	—	—	1
Confusion of sound	—	1	—	—	1
Rhotacism	3	3	6	1	13
Lisping	—	13	2	1	16
Eccholalia	—	1	—	—	1
Total	31	40	24	6	101

2,568 attendances were made at the Clinics as follows :—

Clinics.	Sessions.	Treated.	Attendances.
Carmarthen	92	46	609
Llanelly	144	63	921
Ammanford	135	52	775
Llandilo	42	19	263
Totals	413	180	2568

89 cases were discharged from the clinics :—

31 with their defects cured, 29 sufficiently improved as not to warrant further attendances, 25 for lack of co-operation and unsatisfactory attendances, one left the County, and three for other reasons.

Generally, the speech of the children who attended the Clinics regularly, and whose parents showed intelligent co-operation, improved considerably.

A summary of the waiting lists on the 31st December is as follows :—

	Carmar- then	Llanelly	Amman- ford	Llan- dilo	Total
Waiting Treatment	—	—	—	—	—
Not yet seen	5	62	2	8	77
Totals	5	62	2	8	77

Rheumatic Supervisory Clinics.—The Clinics for the supervision of rheumatic and heart complaints in children were continued at Llanelly, Carmarthen and Ammanford. Dr. M. G. Danaher, Assistant Medical Officer, was in charge of the Clinics, and regular monthly sessions were held at each centre.

Children showing abnormal cardiac physical signs, or giving a history of rheumatism or chorea, were referred to the Clinics by School Medical Officers.

Cases of congenital heart disease seen at the Clinics are provisionally classified. In general, such cases require hospital investigation, many of them demanding the application of an exacting technique for diagnosis and treatment.

Rheumatic children, however, require protection against recurring infection and the observation of children who have had acute rheumatism is an important aspect of the work. Relapse is a frequent feature of rheumatic disease in childhood and its early recognition is of prime importance.

The main work of the Clinics is, therefore, concerned with the observation of children who have had "juvenile rheumatism," with an effort to prevent recrudescence of a disease which can exert such a progressively incapacitating influence.

The intelligent co-operation of parent and child in regard to precautions to be observed is most desirable. It is important, wherever possible, that the child leads a normal life in relation to games and exercise, endeavouring to maintain a proper balance between excessive fatigue and undue restriction.

The following is a summary of the cases seen at the Clinics :—

Defect.	No. of cases.
Observation following acute rheumatism	83
Observation following chorea	16
Congenital lesions	20
Delicate	7
Anaemia	4
No apparent disease	5
Total Number of Cases	135

218 attendances (140 at Llanelly, 45 at Carmarthen and 33 at Ammanford), were made at the Clinics.

At the end of the year there were 67 cases (40 at Llanelly, 14 at Carmarthen and 13 at Ammanford) on the registers of the Clinics.

Tuberculosis.—Treatment of tuberculous children is the responsibility of the Regional Hospital Board, to whom all suspected cases are referred.

The following shows the number of children referred by School Medical Officers and private medical practitioners for examination by the Chest Physicians during the year :—

	Dr. D. B. Ll. Morgan	Dr. J. T. Jones.	Others.	Total.
Total number of children examined during 1955	717	356	17	1090
Number of these children who were :				
(a) Contacts	288	105	3	396
(b) Under school age	188	103	2	293
(c) Found to be suffering from :				
(i) Respiratory Tuberculosis	23	7	—	30
(ii) Non-Respiratory Tuberculosis	9	1	—	10
(d) Still under observation but not diagnosed at 31/12/55	47	39	7	93
(e) Found with no evidence of active tuberculosis	638	309	10	957
Analysis of Non-Respiratory cases :				
(a) Spine	—	—	—	—
(b) Hip	2	—	—	2
(c) Knee	1	—	—	1
(d) Abdomen	1	—	—	1
(e) Glands	3	—	—	3
(f) Shoulder	—	—	—	—
(g) Other sites	2	1	—	3
Treatment :				
(a) Number treated in Sanatoria.....	4	4	—	8
(b) Number treated in Hospital	16	11	1	28
(c) Number treated in Surgical Hospital	9	—	—	9
(d) Number treated in Open-Air School	3	5	—	8

Child Guidance.—The Child Guidance Clinic established by the Cefncoed Hospital Management Committee continued to be held at the Brynmair Clinic, Llanelly. 14 new cases were referred to the Clinic by School Medical Officers, and records are held of a further 12 cases referred by consultants and general medical practitioners.

REPORT OF PRINCIPAL DENTAL OFFICER

The year 1955 marks the last full year of my service as Principal Dental Officer before attaining the age for retirement. I have held the post for over thirty years, and despite the many difficulties experienced, I look back with a good deal of satisfaction.

The appointment of a School Dental Officer in 1925 aroused some adverse comment throughout the County. Public opinion was woefully uninformed as to the ultimate value of a School Dental Service. There were many opinionated parents who rejected out of hand any advice or treatment the service had to offer. There

were others who accepted extractions only, and with pointed or harsh instructions to refrain from filling teeth. During the first decade of the Service it was indeed, uphill pioneering work with recurring discouragement and disappointments bedevilled by inadequate dental staff. There were long periods when the work had to be carried on single handed. In those days, the dental condition of school children generally was on the whole deplorable, and treatment was mainly confined to extractions and the relief of pain.

The increase in dental staff in more recent years has resulted in a more effective service, although for some years it has had of necessity to be confined to primary school children except for casual emergencies from the secondary schools. The condition of the mouths of the children attending the primary schools in the County is now in general quite satisfactory. Nowadays, parents are much more alive to the advantages the School Dental Service has to offer in routine examination and treatment. They are much more co-operative, and are increasingly aware of the value of conservative dental treatment which includes the correction of deformities. There are still some parents who too often quietly submit to the whims of their children, but it is gratifying to report that a feature of the work for primary school children is the increasing acceptance and appreciation of conservative treatment. This is reflected in the following figures :—

1938—	1.74 teeth extracted for each tooth filled.
1949—	3.19 teeth extracted for each tooth filled.
1950—	5.05 teeth extracted for each tooth filled.
1951—	10.30 teeth extracted for each tooth filled.
1952—	5.88 teeth extracted for each tooth filled.
1953—	3.40 teeth extracted for each tooth filled.
1954—	2.27 teeth extracted for each tooth filled.
1955—	1.94 teeth extracted for each tooth filled.

The year 1955 saw no change in the staffing position of the service and at the end of the year, the services of two Dental Officers over retiring age were being retained in a temporary capacity ; repeated advertisements have failed to attract any applicants. I attain retiring age during 1956. Not only does there seem to be no prospect of extending the Dental Service to cover secondary school pupils but the continuation of the present restricted service is threatened.

All primary schools were visited for dental inspection during the year, and 17,795 children were examined ; 15,634 (87.86%) were found to require treatment. Consents to treatment were received in respect of 12,623 a percentage of 80.74.

764 treatment sessions were held at the three fixed Clinics in the County and 1,097 sessions at schools. A summary of the work undertaken is as follows :—

Individual children treated	.....	.....	.....	7089
Attendances for treatment	.....	.....	.....	10211
Teeth extracted	.....	.....	.....	7759
Teeth saved by filling	.....	.....	.....	3990
Teeth received minor treatment	.....	.....	.....	3323
Administrations of general anaesthetic	.....	.....	.....	3837

More detailed figures will be found in Table V. of the Statistical Tables.

Fifty-nine new cases were referred to the Dental Officers for Orthodontic Treatment, and thirteen cases whose treatment had been commenced before 1955 attended for review and continuation of treatment.

The following is a summary of the treatment undertaken :—

(a) Cases commenced during the year	.....	.....	59
(b) Cases carried forward from previous year.....	.....	.....	13
(c) Cases completed during the year	.....	.....	31
(d) Cases discontinued during the year	.....	.....	10
(e) Pupils treated with appliances	.....	.....	38
(f) Removable appliances fitted	.....	.....	30
(g) Fixed appliances fitted.....	.....	.....	8
(h) Number of pupils supplied with artificial dentures	.....	.....	14
(i) Miscellaneous treatment	.....	.....	6

I have in previous reports mentioned the increasing awareness of parents to the need for correcting mouth deformities. These conditions range from displacement of a single tooth to displacement of teeth involving the whole upper and lower jaws. Orthodontic treatment for these cases is very important, not only for the proper development and functioning of the jaws but also for the improvement of speech and appearance. The demand for this type of treatment is on the increase and it will mean in the not too distant future, the appointment of a Dental Officer who will specialise in and devote his full time to orthodontic work. I must pay tribute to Mr. R. E. Rix, the London Consultant Orthodontist for the very excellent advice and service he has given to me and my staff for many years, in this very difficult branch of dentistry.

Important as are the treatment functions of the School Dental Service, a duty of no less importance is the encouragement and education of children to take a positive outlook towards dental health. Continued efforts should be made by means of talkie films, film strips, etc., to spread the knowledge and importance of mouth

hygiene. Prevention of dental caries should be the aim of health authorities. Carious teeth are so prevalent and cause so much distress that every possible effort for prevention should be made.

My last annual report would not be complete without expressing appreciation of the never-failing co-operation and assistance of the headteachers and their staffs in connection with the work of the School Dental Service. What has been achieved by the Dental Service in this County would not have been possible otherwise. I must too, record my grateful personal thanks for the kindness, consideration, and assistance I have at all times received at the schools.

I must also express to the Chairman and members of the Education Committee my warmest thanks and appreciation for their kindness at all times and for their sympathetic attitude to the School Dental Service. In conclusion, I have once again to thank the Principal School Medical Officer, Medical and Dental Staff, Health Visitors, and Nurses for their valued co-operation and assistance.

G. UNGOED GRIFFITHS,

Principal Dental Officer.

SCHOOL MILK AND MEALS

The latest information available at the end of the year showed that out of a total attendance of 24,160 on a particular day, milk and meals were being supplied as follows :—

Milk	.....	.....	19,066 children (78.92%).
Meals	.....	.....	17,255 children (71.42%).

This compares with percentages of 81.52 and 70.78 respectively for milk and meals a year ago.

Every effort is made to ensure that milk supplied to Schools is of a satisfactory standard, and whenever possible Pasteurised or Tuberculin Tested milk is provided. Where these grades of milk are not available, satisfactory samples are obtained before the proposed supplies are approved. Samples of all school milk are regularly taken for analysis by the Staff of the Chief Inspector of Weights and Measures.

The following table gives the number of School Departments receiving the different grades of milk at the end of the year :—

Pasteurised	.....	.....	.....	154
Tuberculin Tested	.....	.....	.....	9
Raw	.....	.....	.....	52
Reconstituted Dried Milk	.....	.....	.....	2
Milk Tablets	.....	.....	.....	6

Two small rural schools were without a supply of milk at the end of the year.

Under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-1953, pasteurised milk, as from the 1st October, 1954, could only be sold as such if it was delivered to the consumer in the bottles or containers in which it was pasteurised. Some retailers purchase pasteurised milk in bulk and bottle it themselves or transfer it to other containers for retail.

With regard to tuberculin tested milk it is only in exceptional circumstances that the Minister of Education is prepared to approve for grant purposes expenditure on milk, the purchase price of which is more than the maximum price for pasteurised milk.

The arrangements for regular bacteriological investigations in respect of all school canteen staffs continued during the year with satisfactory results in all cases.

All appointments to school kitchen and canteen staffs were subject to satisfactory Chest X-ray examinations and to satisfactory faecal and urine bacteriological examinations.

CO-OPERATION OF PARENTS, TEACHERS, AND VOLUNTARY ORGANISATIONS

Generally, parents display an active interest in the medical inspection and treatment of their children, and are eager to follow the advice given by Medical Officers. 2,645 parents were present at the medical inspections during the year, equivalent to a percentage of 21.76. Greater efforts should be made by parents to attend the first medical examination of children at school.

Appreciation of the keen interest and active co-operation of Headteachers and their staffs must again be recorded. The importance of their influence in matters relating to the children and also to the parents cannot be over-estimated, and the activities of the School Health Service would be seriously handicapped without that help and co-operation.

A good deal of assistance is also rendered by the Inspectors of the National Society for the Prevention of Cruelty to Children, but their work relating to problem families and neglected children is now undertaken through the Children's Officer.

HANDICAPPED PUPILS

The Education Committee have a duty to provide handicapped pupils with an education suited to their needs, and the ascertainment and classification of handicapped children is one of the main functions of the School Health Service. The work in the County has been undertaken satisfactorily over the years except that in connection with the educationally subnormal and the partially deaf.

Twelve pupils were reported to the Local Health Authority during the year, eleven as being incapable of receiving benefit from education at school, and one as requiring supervision after leaving school.

143 handicapped children in the County have been ascertained to require special educational treatment. Fifty-one of these were on the 31st January, 1956, pupils at Residential Special Schools while thirteen were receiving home tuition. A classification of the handicapped pupils is as follows :—

Handicap.	At Special Schools.	Receiving Home Tuition.	Requiring places at Special Schools.
Blind	5	—	2
Partially Blind	9	—	3
Deaf	18	—	3
Partially Deaf	1	—	—
Delicate	5	—	12
Physically Handicapped :			
(a) Heart	2	3	4
(b) Spastics	5*	5	12
(c) Others	1	5	12
Educationally Subnormal	2	—	41†
Maladjusted	2	—	2
Epileptics	1	—	1
Total	51	13	92

* 2 at Independent School.

† Includes 14 children recommended for admission to special classes at ordinary schools.

The number of educationally subnormal children shown represents only a small proportion of the estimated number of such children in the County. Records are held of a further 210 children who are probably educationally subnormal but who require further detailed examination.

Classes for backward children are held at nine schools in the County, and there were 159 children on the registers of these classes at the beginning of 1956.

At the end of the year, preparations were being made for the opening of the Highmead Joint Residential School for educationally subnormal pupils on the 21st February, 1956. Arrangements were in hand for the admission of eight children from Carmarthenshire.

With regard to the proposal to establish a residential special school for delicate children at Pendine, it is now considered that the existing and proposed provision of boarding places for delicate children in South Wales as a whole would be sufficient for needs of this type of case.

SCHOOL CLINICS

Location of Clinic.	Type of Clinic.	No. of Sessions
Permanent Clinics :		
Brynmair Clinic, Goring Road, Llanelly	Orthopaedic	Six fortnightly
	Asthma	One weekly
	Minor Ailments	Six weekly
	Rheumatic Supervisory	Three monthly
	Speech Therapy	Three weekly
	Dental	As required
The Clinic, High Street, Amman- ford	Orthopaedic	Two weekly
	Asthma	One weekly
	Minor Ailments	Five weekly
	Rheumatic Supervisory	One monthly
	Speech Therapy	Three weekly
	Dental	As required
Pond Street Clinic, Pentrefelin, Carmarthen	Asthma	One weekly
	Minor Ailments	Five weekly
	Rheumatic Supervisory	One monthly
	Speech Therapy	Two weekly
	Dental	Three weekly and as required
Penuel Old Vestry, St. Clears	Orthopaedic	Two fortnightly
	Dental	As required
Temporary Clinics :		
Dynevor Church Hall, Llandilo	Speech Therapy	One weekly
Penuel Chapel Vestry, Penuel Street, Carmarthen	Orthopaedic	Two weekly
Salem Chapel Vestry, New Road, Llandilo	do.	Two fortnightly
The Reading Room and Institute, Llandovery	do.	do.
The Institute, Memorial Square, Burry Port	do.	do.
The Church Hall, Brynamman	do.	do.
Assembly Rooms, Memorial Hall, Llandeibie	do.	do.
Memorial Hall, Pontyberem	do.	do.
Welfare Hall, Pontyates	do.	do.
Memorial Hall, Whitland	do.	do.
County Primary School, Garnant.....	do.	do.
Church Hall, Pencader	do.	do.
Bethania Chapel Vestry, Tumble.....	do.	do.
The Institute, Trimsaran	do.	One fortnightly
Trinity Methodist Schoolroom, Kidwelly	do.	do.

TABLE I.

**MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS**

A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected and Number of Children Examined in each :

Entrants .....	.....	.....	.....	2362
Second Age Group .....	.....	.....	.....	2487
Third Age Group .....	.....	.....	.....	1432
Total				6281

Additional Periodic Inspections

Grand Total

B.—OTHER INSPECTIONS

Number of Special Inspections .....	.....	.....	.....	2644
Number of Re-Inspections .....	.....	.....	.....	1600
Total				4244

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin).

Group. (1)	For defective vision (exclud- ing squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils. (4)
Entrants	31	506	521
Second Age Group	186	222	407
Third Age Group.....	131	77	207
Total.....	348	805	1135
Additional Periodic In- spections.....	276	327	580
Grand Total	624	1132	1715

TABLE II.

(A.) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1955

Defect or Disease.	PERIODIC INSPECTIONS.			SPECIAL INSPECTIONS.		
	No. of defects.		Requiring to be kept under observation, but not requiring treatment.	No. of defects.		Requiring to be kept under observation, but not requiring treatment.
	(2)	(3)		(4)	(5)	
(1)						
Skin	57	120		14	28	
Eyes — (a) Vision	624	524		182	476	
(b) Squint	58	92		15	34	
(c) Other	50	37		20	3	
Ears — (a) Hearing	10	27		5	13	
(b) Otitis Media	26	71		12	24	
(c) Other	18	29		2	8	
Nose or Throat	401	815		137	255	
Speech	73	87		38	33	
Cervical Glands	27	198		12	65	
Heart and Circulation	40	158		8	60	
Lungs	156	347		45	150	
Developmental—						
(a) Hernia	15	33		6	4	
(b) Other	33	84		8	27	
Orthopaedic—						
(a) Posture	49	47		5	15	
(b) Flat foot	264	130		117	54	
(c) Other	138	159		56	43	
Nervous system—						
(a) Epilepsy	4	7		2	9	
(b) Other	5	33		1	10	
Psychological—						
(a) Development	7	56		6	19	
(b) Stability	2	15		1	10	
Other	63	154		14	60	

(B.) CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE
AGE GROUPS

Age Groups.	Number of Pupils Inspected.	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	2362	1646	69.69	713	30.19	3	0.12
Second Age Group	2487	1645	66.14	836	33.62	6	0.24
Third Age Group	1432	997	69.62	435	30.38	—	—
Additional Periodic Inspections	3230	2203	68.20	1020	31.58	7	0.22
Total	9511	6491	68.25	3004	31.58	16	0.17

TABLE III.

INFESTATION WITH VERMIN

(i)	Total number of examinations in the schools by the school nurses or other authorized persons	.....	96366
(ii)	Total number of <i>individual</i> pupils found to be infested	.....	533
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	.....	30
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	.....	—

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS

GROUP 1.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III.)

				Number of cases treated or under treatment during the year.	
				By the Authority.	Otherwise.
Ringworm :	(i) Scalp	.....	.....	5	2
	(ii) Body	.....	.....	6	—
Scabies	.....	.....	.....	2	—
Impetigo	.....	.....	.....	90	—
Other skin diseases	.....	.....	.....	20	21
Total				123	23

GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with.	
	By the Authority.	Otherwise.
External and other, excluding errors of refraction and squint	—	152
Errors of Refraction (including squint)	—	1303
Total	—	1455
Number of pupils for whom spectacles were		
(a) Prescribed	—	786
(b) Obtained	—	689

GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated.	
	By the Authority.	Otherwise.
Received operative treatment		
(a) for diseases of the ear	—	160
(b) for adenoids and chronic tonsillitis	—	441
(c) for other nose and throat conditions.....	—	108
Received other forms of treatment	—	181
Total	—	890

GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals	26	43
	By the Authority.	Otherwise.
(b) Number treated otherwise, e.g., in clinics or outpatient departments	1708	161

GROUP 5.—CHILD GUIDANCE TREATMENT

	Number of cases treated.	
	In the Authority's Child Guidance Clinics.	Elsewhere.
Number of pupils treated at Child Guidance Clinics	—	34

GROUP 6.—SPEECH THERAPY

	Number of cases treated.	
	By the Authority.	Otherwise.
Number of pupils treated by Speech Therapists	180	—

GROUP 7.—OTHER TREATMENT GIVEN.

				Number of cases treated.	
				By the Authority.	Otherwise.
(a)	Miscellaneous minor ailments	.....		786	—
(b)	Other (specify)				
	1. General Surgical	.....	.....	—	692
	2. General Medical	.....	.....	—	264
	Total	.....		786	956

TABLE V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers :—			
(a) At Periodic Inspection	.....	.....	17073
(b) As Specials.....	.....	.....	722
Total (1)			17795
(2) Number found to require treatment	.....	.....	15634
(3) Number offered treatment	.....	.....	15634
(4) Number actually treated	7089
(5) Attendances made by pupils for treatment	10211
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(6) Half-days devoted to : Periodic Inspection	287
Treatment	1861
Total (6)			2148
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(7) Fillings : Permanent Teeth	4113
Temporary Teeth	461
Total (7)			4574
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(8) Number of Teeth filled : Permanent Teeth	3540
Temporary Teeth	450
Total (8)			3990
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(9) Extractions : Permanent Teeth	1008
Temporary Teeth	6751
Total (9)			7759
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(10) Administration of general anaesthetics for extraction	3837
<hr/>			
(11) Other operations : Permanent Teeth	2221
Temporary Teeth	1102
Total (11)			3323
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